(When Filled In)

| | | MONTH | LY PROJECT | REPORT | | |
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| PROJECT TITLE | W. 344 | Mication Wo | A COMPANY | | | 25X1A9a |
| To noting | fy all fiel | ld stations | of stands | ard modific | ations | to equipment |
| Reproduce nec Modification category of d | Work Order | s. Obtain | approval | and coordin | ation. | rs for all Determine |
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| APPROVAL DATE | APPROYED BY | /HWK/ | | | ING DATE | COMPLETION DATE |
| REMARKS | | / * 3 */ | | F *** | | <u></u> |

- 1. Modification Work Order No. 14, AT-3 Transmitter Modification, was distributed all areas. This publication was informational in nature, since all existing items have already been modified and future units will incorporate the mentioned changes.
- 2. Optional Modification Work Order No. 47, Hand Generator Type GN-43, was received from Printing Services Division for distribution in early September.

(When Filled In)

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| /HWK/ | | STARTING DATE 2 February | COMPLETION DATE | |
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